

AMENDED IN SENATE SEPTEMBER 4, 2007

AMENDED IN SENATE AUGUST 20, 2007

AMENDED IN SENATE JULY 17, 2007

AMENDED IN SENATE JULY 3, 2007

AMENDED IN SENATE JUNE 21, 2007

AMENDED IN ASSEMBLY MAY 14, 2007

AMENDED IN ASSEMBLY MAY 3, 2007

AMENDED IN ASSEMBLY APRIL 16, 2007

CALIFORNIA LEGISLATURE—2007–08 REGULAR SESSION

## **ASSEMBLY BILL**

**No. 1687**

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**Introduced by Assembly Member Brownley**

February 23, 2007

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An act to amend Section 56.10 of, and to add Section 56.103 to, the Civil Code, relating to confidential information.

### LEGISLATIVE COUNSEL'S DIGEST

AB 1687, as amended, Brownley. Confidential information.

(1) Existing law prohibits a provider of health care, a health care service plan, contractor, or corporation and its subsidiaries and affiliates from intentionally sharing, selling, or otherwise using any medical information, as defined, for any purpose not necessary to provide health care services to a patient, except as expressly authorized by the patient, enrollee, or subscriber, as specified, or as otherwise required or authorized by law. Existing law also permits that medical information to be disclosed to providers of health care, health care service plans,

contractors, or other health care professionals or facilities for purposes of diagnosis or treatment of the patient. Existing law provides that a violation of these provisions that results in economic loss or personal injury to a patient is punishable as a misdemeanor. Existing federal law defines “covered entity” for purposes of the federal Health Insurance Portability and Accountability Act.

This bill would provide that for purposes of these provisions, a provider of health care may disclose medical information to a county social worker, a probation officer, or any other person who is legally authorized to have custody or care of a minor, as defined, for the purpose of coordinating health care services and medical treatment provided to the minor. By expanding the definition of a crime, the bill would impose a state-mandated local program. The bill would also prohibit a county social worker, probation officer, or any other person who is legally authorized to have custody or care of a minor who receives medical information from further disclosing that information unless the disclosure is for the purpose of coordinating health care services and medical treatment of the minor and the disclosure is authorized by law. *The bill would further provide that medical information disclosed pursuant to these provisions may not be admitted into evidence in any criminal or delinquency proceeding against the minor thereby requiring a <sup>2</sup>/<sub>3</sub> vote for enactment pursuant to the Victims’ Bill of Rights.* The bill would provide that if a provider of health care determines that the disclosure of medical information concerning the diagnosis and treatment of a mental health condition of a minor is reasonably necessary for the purpose of assisting in coordinating the treatment and care of the minor, that medical information may be disclosed to a county social worker, probation officer, or any other person who is legally authorized to have custody or care of the minor. The bill would also prohibit the further disclosure of information concerning the diagnosis and treatment of a mental health condition of a minor unless the disclosure is for the purpose of coordinating mental health services and treatment of the minor and the disclosure is authorized by law. The bill would also make related legislative findings and declarations.

(2) The bill would also incorporate additional changes to Section 56.10 of the Civil Code proposed by AB 1687 and AB 1727, to be operative only if any or all of those bills are enacted and this bill is chaptered last.

(3) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: ~~majority~~<sup>2/3</sup>. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: yes.

*The people of the State of California do enact as follows:*

1 SECTION 1. The Legislature finds and declares all of the  
2 following:

3 (a) The State of California is responsible for the health care  
4 needs of children and youth who have been removed from their  
5 homes due to abuse, neglect, or delinquency, and for ensuring that  
6 their health care and mental health needs are met. Access to health  
7 care and mental health records is essential for ensuring that health  
8 care and mental health needs of foster children and youth are being  
9 met.

10 (b) A lack of clarity about who may be authorized to share health  
11 care and mental health records with caregivers of children and  
12 youth in the state's care often results in inadequate health care  
13 information being available to caregivers, which jeopardizes the  
14 health of the children and youth in the state's care.

15 (c) It is the intent of the Legislature to improve the sharing of  
16 health care and mental health information concerning children and  
17 youth in the state's care by eliminating barriers caused by a lack  
18 of clarity in existing law regarding who may be authorized to share  
19 health care and mental health information. It is the further intent  
20 of the Legislature not to expand existing law and to clarify that  
21 existing provisions regarding confidentiality of medical records  
22 and the federal Health Insurance Portability and Accountability  
23 Act (HIPAA) authorizes psychotherapists to provide health care  
24 and mental health information to caregivers of children and youth  
25 in foster care to facilitate providing health care and mental health  
26 care that meets the needs of these children and youth.

27 SEC. 2. Section 56.10 of the Civil Code is amended to read:

28 56.10. (a) No provider of health care, health care service plan,  
29 or contractor shall disclose medical information regarding a patient  
30 of the provider of health care or an enrollee or subscriber of a

1 health care service plan without first obtaining an authorization,  
2 except as provided in subdivision (b) or (c).

3 (b) A provider of health care, a health care service plan, or a  
4 contractor shall disclose medical information if the disclosure is  
5 compelled by any of the following:

6 (1) By a court pursuant to an order of that court.

7 (2) By a board, commission, or administrative agency for  
8 purposes of adjudication pursuant to its lawful authority.

9 (3) By a party to a proceeding before a court or administrative  
10 agency pursuant to a subpoena, subpoena duces tecum, notice to  
11 appear served pursuant to Section 1987 of the Code of Civil  
12 Procedure, or any provision authorizing discovery in a proceeding  
13 before a court or administrative agency.

14 (4) By a board, commission, or administrative agency pursuant  
15 to an investigative subpoena issued under Article 2 (commencing  
16 with Section 11180) of Chapter 2 of Part 1 of Division 3 of Title  
17 2 of the Government Code.

18 (5) By an arbitrator or arbitration panel, when arbitration is  
19 lawfully requested by either party, pursuant to a subpoena duces  
20 tecum issued under Section 1282.6 of the Code of Civil Procedure,  
21 or any other provision authorizing discovery in a proceeding before  
22 an arbitrator or arbitration panel.

23 (6) By a search warrant lawfully issued to a governmental law  
24 enforcement agency.

25 (7) By the patient or the patient's representative pursuant to  
26 Chapter 1 (commencing with Section 123100) of Part 1 of Division  
27 106 of the Health and Safety Code.

28 (8) By a coroner, when requested in the course of an  
29 investigation by the coroner's office for the purpose of identifying  
30 the decedent or locating next of kin, or when investigating deaths  
31 that may involve public health concerns, organ or tissue donation,  
32 child abuse, elder abuse, suicides, poisonings, accidents, sudden  
33 infant deaths, suspicious deaths, unknown deaths, or criminal  
34 deaths, or when otherwise authorized by the decedent's  
35 representative. Medical information requested by the coroner under  
36 this paragraph shall be limited to information regarding the patient  
37 who is the decedent and who is the subject of the investigation and  
38 shall be disclosed to the coroner without delay upon request.

39 (9) When otherwise specifically required by law.

1 (c) A provider of health care or a health care service plan may  
2 disclose medical information as follows:

3 (1) The information may be disclosed to providers of health  
4 care, health care service plans, contractors, or other health care  
5 professionals or facilities for purposes of diagnosis or treatment  
6 of the patient. This includes, in an emergency situation, the  
7 communication of patient information by radio transmission or  
8 other means between emergency medical personnel at the scene  
9 of an emergency, or in an emergency medical transport vehicle,  
10 and emergency medical personnel at a health facility licensed  
11 pursuant to Chapter 2 (commencing with Section 1250) of Division  
12 2 of the Health and Safety Code.

13 (2) The information may be disclosed to an insurer, employer,  
14 health care service plan, hospital service plan, employee benefit  
15 plan, governmental authority, contractor, or any other person or  
16 entity responsible for paying for health care services rendered to  
17 the patient, to the extent necessary to allow responsibility for  
18 payment to be determined and payment to be made. If (A) the  
19 patient is, by reason of a comatose or other disabling medical  
20 condition, unable to consent to the disclosure of medical  
21 information and (B) no other arrangements have been made to pay  
22 for the health care services being rendered to the patient, the  
23 information may be disclosed to a governmental authority to the  
24 extent necessary to determine the patient's eligibility for, and to  
25 obtain, payment under a governmental program for health care  
26 services provided to the patient. The information may also be  
27 disclosed to another provider of health care or health care service  
28 plan as necessary to assist the other provider or health care service  
29 plan in obtaining payment for health care services rendered by that  
30 provider of health care or health care service plan to the patient.

31 (3) The information may be disclosed to a person or entity that  
32 provides billing, claims management, medical data processing, or  
33 other administrative services for providers of health care or health  
34 care service plans or for any of the persons or entities specified in  
35 paragraph (2). However, no information so disclosed shall be  
36 further disclosed by the recipient in any way that would violate  
37 this part.

38 (4) The information may be disclosed to organized committees  
39 and agents of professional societies or of medical staffs of licensed  
40 hospitals, licensed health care service plans, professional standards

1 review organizations, independent medical review organizations  
2 and their selected reviewers, utilization and quality control peer  
3 review organizations as established by Congress in Public Law  
4 97-248 in 1982, contractors, or persons or organizations insuring,  
5 responsible for, or defending professional liability that a provider  
6 may incur, if the committees, agents, health care service plans,  
7 organizations, reviewers, contractors, or persons are engaged in  
8 reviewing the competence or qualifications of health care  
9 professionals or in reviewing health care services with respect to  
10 medical necessity, level of care, quality of care, or justification of  
11 charges.

12 (5) The information in the possession of a provider of health  
13 care or health care service plan may be reviewed by a private or  
14 public body responsible for licensing or accrediting the provider  
15 of health care or health care service plan. However, no  
16 patient-identifying medical information may be removed from the  
17 premises except as expressly permitted or required elsewhere by  
18 law, nor shall that information be further disclosed by the recipient  
19 in any way that would violate this part.

20 (6) The information may be disclosed to the county coroner in  
21 the course of an investigation by the coroner's office when  
22 requested for all purposes not included in paragraph (8) of  
23 subdivision (b).

24 (7) The information may be disclosed to public agencies, clinical  
25 investigators, including investigators conducting epidemiologic  
26 studies, health care research organizations, and accredited public  
27 or private nonprofit educational or health care institutions for bona  
28 fide research purposes. However, no information so disclosed shall  
29 be further disclosed by the recipient in any way that would disclose  
30 the identity of a patient or violate this part.

31 (8) A provider of health care or health care service plan that has  
32 created medical information as a result of employment-related  
33 health care services to an employee conducted at the specific prior  
34 written request and expense of the employer may disclose to the  
35 employee's employer that part of the information that:

36 (A) Is relevant in a lawsuit, arbitration, grievance, or other claim  
37 or challenge to which the employer and the employee are parties  
38 and in which the patient has placed in issue his or her medical  
39 history, mental or physical condition, or treatment, provided that

1 information may only be used or disclosed in connection with that  
2 proceeding.

3 (B) Describes functional limitations of the patient that may  
4 entitle the patient to leave from work for medical reasons or limit  
5 the patient's fitness to perform his or her present employment,  
6 provided that no statement of medical cause is included in the  
7 information disclosed.

8 (9) Unless the provider of health care or health care service plan  
9 is notified in writing of an agreement by the sponsor, insurer, or  
10 administrator to the contrary, the information may be disclosed to  
11 a sponsor, insurer, or administrator of a group or individual insured  
12 or uninsured plan or policy that the patient seeks coverage by or  
13 benefits from, if the information was created by the provider of  
14 health care or health care service plan as the result of services  
15 conducted at the specific prior written request and expense of the  
16 sponsor, insurer, or administrator for the purpose of evaluating the  
17 application for coverage or benefits.

18 (10) The information may be disclosed to a health care service  
19 plan by providers of health care that contract with the health care  
20 service plan and may be transferred among providers of health  
21 care that contract with the health care service plan, for the purpose  
22 of administering the health care service plan. Medical information  
23 may not otherwise be disclosed by a health care service plan except  
24 in accordance with the provisions of this part.

25 (11) Nothing in this part shall prevent the disclosure by a  
26 provider of health care or a health care service plan to an insurance  
27 institution, agent, or support organization, subject to Article 6.6  
28 (commencing with Section 791) of Part 2 of Division 1 of the  
29 Insurance Code, of medical information if the insurance institution,  
30 agent, or support organization has complied with all requirements  
31 for obtaining the information pursuant to Article 6.6 (commencing  
32 with Section 791) of Part 2 of Division 1 of the Insurance Code.

33 (12) The information relevant to the patient's condition and care  
34 and treatment provided may be disclosed to a probate court  
35 investigator engaged in determining the need for an initial  
36 conservatorship or continuation of an existent conservatorship, if  
37 the patient is unable to give informed consent, or to a probate court  
38 investigator, probation officer, or domestic relations investigator  
39 engaged in determining the need for an initial guardianship or  
40 continuation of an existent guardianship.

(13) The information may be disclosed to an organ procurement organization or a tissue bank processing the tissue of a decedent for transplantation into the body of another person, but only with respect to the donating decedent, for the purpose of aiding the transplant. For the purpose of this paragraph, the terms “tissue bank” and “tissue” have the same meaning as defined in Section 1635 of the Health and Safety Code.

(14) The information may be disclosed when the disclosure is otherwise specifically authorized by law, including, but not limited to, the voluntary reporting, either directly or indirectly, to the federal Food and Drug Administration of adverse events related to drug products or medical device problems.

(15) Basic information, including the patient’s name, city of residence, age, sex, and general condition, may be disclosed to a state or federally recognized disaster relief organization for the purpose of responding to disaster welfare inquiries.

(16) The information may be disclosed to a third party for purposes of encoding, encrypting, or otherwise anonymizing data. However, no information so disclosed shall be further disclosed by the recipient in any way that would violate this part, including the unauthorized manipulation of coded or encrypted medical information that reveals individually identifiable medical information.

(17) For purposes of disease management programs and services as defined in Section 1399.901 of the Health and Safety Code, information may be disclosed as follows: (A) to an entity contracting with a health care service plan or the health care service plan’s contractors to monitor or administer care of enrollees for a covered benefit, if the disease management services and care are authorized by a treating physician, or (B) to a disease management organization, as defined in Section 1399.900 of the Health and Safety Code, that complies fully with the physician authorization requirements of Section 1399.902 of the Health and Safety Code, if the health care service plan or its contractor provides or has provided a description of the disease management services to a treating physician or to the health care service plan’s or contractor’s network of physicians. Nothing in this paragraph shall be construed to require physician authorization for the care or treatment of the adherents of a well-recognized church or religious denomination



1 who depend solely upon prayer or spiritual means for healing in  
2 the practice of the religion of that church or denomination.

3 (18) The information may be disclosed, as permitted by state  
4 and federal law or regulation, to a local health department for the  
5 purpose of preventing or controlling disease, injury, or disability,  
6 including, but not limited to, the reporting of disease, injury, vital  
7 events, including, but not limited to, birth or death, and the conduct  
8 of public health surveillance, public health investigations, and  
9 public health interventions, as authorized or required by state or  
10 federal law or regulation.

11 (19) The information may be disclosed as described in Section  
12 56.103.

13 (d) Except to the extent expressly authorized by the patient or  
14 enrollee or subscriber or as provided by subdivisions (b) and (c),  
15 no provider of health care, health care service plan, contractor, or  
16 corporation and its subsidiaries and affiliates shall intentionally  
17 share, sell, use for marketing, or otherwise use any medical  
18 information for any purpose not necessary to provide health care  
19 services to the patient.

20 (e) Except to the extent expressly authorized by the patient or  
21 enrollee or subscriber or as provided by subdivisions (b) and (c),  
22 no contractor or corporation and its subsidiaries and affiliates shall  
23 further disclose medical information regarding a patient of the  
24 provider of health care or an enrollee or subscriber of a health care  
25 service plan or insurer or self-insured employer received under  
26 this section to a person or entity that is not engaged in providing  
27 direct health care services to the patient or his or her provider of  
28 health care or health care service plan or insurer or self-insured  
29 employer.

30 SEC. 2.5. Section 56.10 of the Civil Code is amended to read:

31 56.10. (a) No provider of health care, health care service plan,  
32 or contractor shall disclose medical information regarding a patient  
33 of the provider of health care or an enrollee or subscriber of a  
34 health care service plan without first obtaining an authorization,  
35 except as provided in subdivision (b) or (c).

36 (b) A provider of health care, a health care service plan, or a  
37 contractor shall disclose medical information if the disclosure is  
38 compelled by any of the following:

39 (1) By a court pursuant to an order of that court.

1 (2) By a board, commission, or administrative agency for  
2 purposes of adjudication pursuant to its lawful authority.

3 (3) By a party to a proceeding before a court or administrative  
4 agency pursuant to a subpoena, subpoena duces tecum, notice to  
5 appear served pursuant to Section 1987 of the Code of Civil  
6 Procedure, or any provision authorizing discovery in a proceeding  
7 before a court or administrative agency.

8 (4) By a board, commission, or administrative agency pursuant  
9 to an investigative subpoena issued under Article 2 (commencing  
10 with Section 11180) of Chapter 2 of Part 1 of Division 3 of Title  
11 2 of the Government Code.

12 (5) By an arbitrator or arbitration panel, when arbitration is  
13 lawfully requested by either party, pursuant to a subpoena duces  
14 tecum issued under Section 1282.6 of the Code of Civil Procedure,  
15 or any other provision authorizing discovery in a proceeding before  
16 an arbitrator or arbitration panel.

17 (6) By a search warrant lawfully issued to a governmental law  
18 enforcement agency.

19 (7) By the patient or the patient's representative pursuant to  
20 Chapter 1 (commencing with Section 123100) of Part 1 of Division  
21 106 of the Health and Safety Code.

22 (8) By a coroner, when requested in the course of an  
23 investigation by the coroner's office for the purpose of identifying  
24 the decedent or locating next of kin, or when investigating deaths  
25 that may involve public health concerns, organ or tissue donation,  
26 child abuse, elder abuse, suicides, poisonings, accidents, sudden  
27 infant deaths, suspicious deaths, unknown deaths, or criminal  
28 deaths, or when otherwise authorized by the decedent's  
29 representative. Medical information requested by the coroner under  
30 this paragraph shall be limited to information regarding the patient  
31 who is the decedent and who is the subject of the investigation and  
32 shall be disclosed to the coroner without delay upon request.

33 (9) When otherwise specifically required by law.

34 (c) A provider of health care or a health care service plan may  
35 disclose medical information as follows:

36 (1) The information may be disclosed to providers of health  
37 care, health care service plans, contractors, or other health care  
38 professionals or facilities for purposes of diagnosis or treatment  
39 of the patient. This includes, in an emergency situation, the  
40 communication of patient information by radio transmission or

1 other means between emergency medical personnel at the scene  
2 of an emergency, or in an emergency medical transport vehicle,  
3 and emergency medical personnel at a health facility licensed  
4 pursuant to Chapter 2 (commencing with Section 1250) of Division  
5 2 of the Health and Safety Code.

6 (2) The information may be disclosed to an insurer, employer,  
7 health care service plan, hospital service plan, employee benefit  
8 plan, governmental authority, contractor, or any other person or  
9 entity responsible for paying for health care services rendered to  
10 the patient, to the extent necessary to allow responsibility for  
11 payment to be determined and payment to be made. If (A) the  
12 patient is, by reason of a comatose or other disabling medical  
13 condition, unable to consent to the disclosure of medical  
14 information and (B) no other arrangements have been made to pay  
15 for the health care services being rendered to the patient, the  
16 information may be disclosed to a governmental authority to the  
17 extent necessary to determine the patient's eligibility for, and to  
18 obtain, payment under a governmental program for health care  
19 services provided to the patient. The information may also be  
20 disclosed to another provider of health care or health care service  
21 plan as necessary to assist the other provider or health care service  
22 plan in obtaining payment for health care services rendered by that  
23 provider of health care or health care service plan to the patient.

24 (3) The information may be disclosed to a person or entity that  
25 provides billing, claims management, medical data processing, or  
26 other administrative services for providers of health care or health  
27 care service plans or for any of the persons or entities specified in  
28 paragraph (2). However, no information so disclosed shall be  
29 further disclosed by the recipient in any way that would violate  
30 this part.

31 (4) The information may be disclosed to organized committees  
32 and agents of professional societies or of medical staffs of licensed  
33 hospitals, licensed health care service plans, professional standards  
34 review organizations, independent medical review organizations  
35 and their selected reviewers, utilization and quality control peer  
36 review organizations as established by Congress in Public Law  
37 97-248 in 1982, contractors, or persons or organizations insuring,  
38 responsible for, or defending professional liability that a provider  
39 may incur, if the committees, agents, health care service plans,  
40 organizations, reviewers, contractors, or persons are engaged in

1 reviewing the competence or qualifications of health care  
2 professionals or in reviewing health care services with respect to  
3 medical necessity, level of care, quality of care, or justification of  
4 charges.

5 (5) The information in the possession of a provider of health  
6 care or health care service plan may be reviewed by a private or  
7 public body responsible for licensing or accrediting the provider  
8 of health care or health care service plan. However, no  
9 patient-identifying medical information may be removed from the  
10 premises except as expressly permitted or required elsewhere by  
11 law, nor shall that information be further disclosed by the recipient  
12 in any way that would violate this part.

13 (6) The information may be disclosed to the county coroner in  
14 the course of an investigation by the coroner's office when  
15 requested for all purposes not included in paragraph (8) of  
16 subdivision (b).

17 (7) The information may be disclosed to public agencies, clinical  
18 investigators, including investigators conducting epidemiologic  
19 studies, health care research organizations, and accredited public  
20 or private nonprofit educational or health care institutions for bona  
21 fide research purposes. However, no information so disclosed shall  
22 be further disclosed by the recipient in any way that would disclose  
23 the identity of a patient or violate this part.

24 (8) A provider of health care or health care service plan that has  
25 created medical information as a result of employment-related  
26 health care services to an employee conducted at the specific prior  
27 written request and expense of the employer may disclose to the  
28 employee's employer that part of the information that:

29 (A) Is relevant in a lawsuit, arbitration, grievance, or other claim  
30 or challenge to which the employer and the employee are parties  
31 and in which the patient has placed in issue his or her medical  
32 history, mental or physical condition, or treatment, provided that  
33 information may only be used or disclosed in connection with that  
34 proceeding.

35 (B) Describes functional limitations of the patient that may  
36 entitle the patient to leave from work for medical reasons or limit  
37 the patient's fitness to perform his or her present employment,  
38 provided that no statement of medical cause is included in the  
39 information disclosed.

1 (9) Unless the provider of health care or health care service plan  
2 is notified in writing of an agreement by the sponsor, insurer, or  
3 administrator to the contrary, the information may be disclosed to  
4 a sponsor, insurer, or administrator of a group or individual insured  
5 or uninsured plan or policy that the patient seeks coverage by or  
6 benefits from, if the information was created by the provider of  
7 health care or health care service plan as the result of services  
8 conducted at the specific prior written request and expense of the  
9 sponsor, insurer, or administrator for the purpose of evaluating the  
10 application for coverage or benefits.

11 (10) The information may be disclosed to a health care service  
12 plan by providers of health care that contract with the health care  
13 service plan and may be transferred among providers of health  
14 care that contract with the health care service plan, for the purpose  
15 of administering the health care service plan. Medical information  
16 may not otherwise be disclosed by a health care service plan except  
17 in accordance with the provisions of this part.

18 (11) Nothing in this part shall prevent the disclosure by a  
19 provider of health care or a health care service plan to an insurance  
20 institution, agent, or support organization, subject to Article 6.6  
21 (commencing with Section 791) of Part 2 of Division 1 of the  
22 Insurance Code, of medical information if the insurance institution,  
23 agent, or support organization has complied with all requirements  
24 for obtaining the information pursuant to Article 6.6 (commencing  
25 with Section 791) of Part 2 of Division 1 of the Insurance Code.

26 (12) The information relevant to the patient's condition and care  
27 and treatment provided may be disclosed to a probate court  
28 investigator engaged in determining the need for an initial  
29 conservatorship or continuation of an existent conservatorship, if  
30 the patient is unable to give informed consent, or to a probate court  
31 investigator, probation officer, or domestic relations investigator  
32 engaged in determining the need for an initial guardianship or  
33 continuation of an existent guardianship.

34 (13) The information may be disclosed to an organ procurement  
35 organization or a tissue bank processing the tissue of a decedent  
36 for transplantation into the body of another person, but only with  
37 respect to the donating decedent, for the purpose of aiding the  
38 transplant. For the purpose of this paragraph, the terms "tissue  
39 bank" and "tissue" have the same meaning as defined in Section  
40 1635 of the Health and Safety Code.

1 (14) The information may be disclosed when the disclosure is  
2 otherwise specifically authorized by law, including, but not limited  
3 to, the voluntary reporting, either directly or indirectly, to the  
4 federal Food and Drug Administration of adverse events related  
5 to drug products or medical device problems.

6 (15) Basic information, including the patient's name, city of  
7 residence, age, sex, and general condition, may be disclosed to a  
8 state or federally recognized disaster relief organization for the  
9 purpose of responding to disaster welfare inquiries.

10 (16) The information may be disclosed to a third party for  
11 purposes of encoding, encrypting, or otherwise anonymizing data.  
12 However, no information so disclosed shall be further disclosed  
13 by the recipient in any way that would violate this part, including  
14 the unauthorized manipulation of coded or encrypted medical  
15 information that reveals individually identifiable medical  
16 information.

17 (17) For purposes of disease management programs and services  
18 as defined in Section 1399.901 of the Health and Safety Code,  
19 information may be disclosed as follows: (A) to an entity  
20 contracting with a health care service plan or the health care service  
21 plan's contractors to monitor or administer care of enrollees for a  
22 covered benefit, if the disease management services and care are  
23 authorized by a treating physician, or (B) to a disease management  
24 organization, as defined in Section 1399.900 of the Health and  
25 Safety Code, that complies fully with the physician authorization  
26 requirements of Section 1399.902 of the Health and Safety Code,  
27 if the health care service plan or its contractor provides or has  
28 provided a description of the disease management services to a  
29 treating physician or to the health care service plan's or contractor's  
30 network of physicians. Nothing in this paragraph shall be construed  
31 to require physician authorization for the care or treatment of the  
32 adherents of a well-recognized church or religious denomination  
33 who depend solely upon prayer or spiritual means for healing in  
34 the practice of the religion of that church or denomination.

35 (18) The information may be disclosed, as permitted by state  
36 and federal law or regulation, to a local health department for the  
37 purpose of preventing or controlling disease, injury, or disability,  
38 including, but not limited to, the reporting of disease, injury, vital  
39 events, including, but not limited to, birth or death, and the conduct  
40 of public health surveillance, public health investigations, and

1 public health interventions, as authorized or required by state or  
2 federal law or regulation.

3 (19) The information may be disclosed, consistent with  
4 applicable law and standards of ethical conduct, by a  
5 psychotherapist, as defined in Section 1010 of the Evidence Code,  
6 if the psychotherapist, in good faith, believes the disclosure is  
7 necessary to prevent or lessen a serious and imminent threat to the  
8 health or safety of a reasonably foreseeable victim or victims, and  
9 the disclosure is made to a person or persons reasonably able to  
10 prevent or lessen the threat, including the target of the threat.

11 (20) The information may be disclosed as described in Section  
12 56.103.

13 (d) Except to the extent expressly authorized by the patient or  
14 enrollee or subscriber or as provided by subdivisions (b) and (c),  
15 no provider of health care, health care service plan, contractor, or  
16 corporation and its subsidiaries and affiliates shall intentionally  
17 share, sell, use for marketing, or otherwise use any medical  
18 information for any purpose not necessary to provide health care  
19 services to the patient.

20 (e) Except to the extent expressly authorized by the patient or  
21 enrollee or subscriber or as provided by subdivisions (b) and (c),  
22 no contractor or corporation and its subsidiaries and affiliates shall  
23 further disclose medical information regarding a patient of the  
24 provider of health care or an enrollee or subscriber of a health care  
25 service plan or insurer or self-insured employer received under  
26 this section to any person or entity that is not engaged in providing  
27 direct health care services to the patient or his or her provider of  
28 health care or health care service plan or insurer or self-insured  
29 employer.

30 SEC. 2.7. Section 56.10 of the Civil Code is amended to read:

31 56.10. (a) No provider of health care, health care service plan,  
32 or contractor shall disclose medical information regarding a patient  
33 of the provider of health care or an enrollee or subscriber of a  
34 health care service plan without first obtaining an authorization,  
35 except as provided in subdivision (b) or (c).

36 (b) A provider of health care, a health care service plan, or a  
37 contractor shall disclose medical information if the disclosure is  
38 compelled by any of the following:

39 (1) By a court pursuant to an order of that court.

1 (2) By a board, commission, or administrative agency for  
2 purposes of adjudication pursuant to its lawful authority.

3 (3) By a party to a proceeding before a court or administrative  
4 agency pursuant to a subpoena, subpoena duces tecum, notice to  
5 appear served pursuant to Section 1987 of the Code of Civil  
6 Procedure, or any provision authorizing discovery in a proceeding  
7 before a court or administrative agency.

8 (4) By a board, commission, or administrative agency pursuant  
9 to an investigative subpoena issued under Article 2 (commencing  
10 with Section 11180) of Chapter 2 of Part 1 of Division 3 of Title  
11 2 of the Government Code.

12 (5) By an arbitrator or arbitration panel, when arbitration is  
13 lawfully requested by either party, pursuant to a subpoena duces  
14 tecum issued under Section 1282.6 of the Code of Civil Procedure,  
15 or any other provision authorizing discovery in a proceeding before  
16 an arbitrator or arbitration panel.

17 (6) By a search warrant lawfully issued to a governmental law  
18 enforcement agency.

19 (7) By the patient or the patient's representative pursuant to  
20 Chapter 1 (commencing with Section 123100) of Part 1 of Division  
21 106 of the Health and Safety Code.

22 (8) By a coroner, when requested in the course of an  
23 investigation by the coroner's office for the purpose of identifying  
24 the decedent or locating next of kin, or when investigating deaths  
25 that may involve public health concerns, organ or tissue donation,  
26 child abuse, elder abuse, suicides, poisonings, accidents, sudden  
27 infant deaths, suspicious deaths, unknown deaths, or criminal  
28 deaths, or when otherwise authorized by the decedent's  
29 representative. Medical information requested by the coroner under  
30 this paragraph shall be limited to information regarding the patient  
31 who is the decedent and who is the subject of the investigation and  
32 shall be disclosed to the coroner without delay upon request.

33 (9) When otherwise specifically required by law.

34 (c) A provider of health care or a health care service plan may  
35 disclose medical information as follows:

36 (1) The information may be disclosed to providers of health  
37 care, health care service plans, contractors, or other health care  
38 professionals or facilities for purposes of diagnosis or treatment  
39 of the patient. This includes, in an emergency situation, the  
40 communication of patient information by radio transmission or



1 other means between emergency medical personnel at the scene  
2 of an emergency, or in an emergency medical transport vehicle,  
3 and emergency medical personnel at a health facility licensed  
4 pursuant to Chapter 2 (commencing with Section 1250) of Division  
5 2 of the Health and Safety Code.

6 (2) The information may be disclosed to an insurer, employer,  
7 health care service plan, hospital service plan, employee benefit  
8 plan, governmental authority, contractor, or any other person or  
9 entity responsible for paying for health care services rendered to  
10 the patient, to the extent necessary to allow responsibility for  
11 payment to be determined and payment to be made. If (A) the  
12 patient is, by reason of a comatose or other disabling medical  
13 condition, unable to consent to the disclosure of medical  
14 information and (B) no other arrangements have been made to pay  
15 for the health care services being rendered to the patient, the  
16 information may be disclosed to a governmental authority to the  
17 extent necessary to determine the patient's eligibility for, and to  
18 obtain, payment under a governmental program for health care  
19 services provided to the patient. The information may also be  
20 disclosed to another provider of health care or health care service  
21 plan as necessary to assist the other provider or health care service  
22 plan in obtaining payment for health care services rendered by that  
23 provider of health care or health care service plan to the patient.

24 (3) The information may be disclosed to a person or entity that  
25 provides billing, claims management, medical data processing, or  
26 other administrative services for providers of health care or health  
27 care service plans or for any of the persons or entities specified in  
28 paragraph (2). However, no information so disclosed shall be  
29 further disclosed by the recipient in any way that would violate  
30 this part.

31 (4) The information may be disclosed to organized committees  
32 and agents of professional societies or of medical staffs of licensed  
33 hospitals, licensed health care service plans, professional standards  
34 review organizations, independent medical review organizations  
35 and their selected reviewers, utilization and quality control peer  
36 review organizations as established by Congress in Public Law  
37 97-248 in 1982, contractors, or persons or organizations insuring,  
38 responsible for, or defending professional liability that a provider  
39 may incur, if the committees, agents, health care service plans,  
40 organizations, reviewers, contractors, or persons are engaged in

1 reviewing the competence or qualifications of health care  
2 professionals or in reviewing health care services with respect to  
3 medical necessity, level of care, quality of care, or justification of  
4 charges.

5 (5) The information in the possession of a provider of health  
6 care or health care service plan may be reviewed by a private or  
7 public body responsible for licensing or accrediting the provider  
8 of health care or health care service plan. However, no  
9 patient-identifying medical information may be removed from the  
10 premises except as expressly permitted or required elsewhere by  
11 law, nor shall that information be further disclosed by the recipient  
12 in any way that would violate this part.

13 (6) The information may be disclosed to the county coroner in  
14 the course of an investigation by the coroner's office when  
15 requested for all purposes not included in paragraph (8) of  
16 subdivision (b).

17 (7) The information may be disclosed to public agencies, clinical  
18 investigators, including investigators conducting epidemiologic  
19 studies, health care research organizations, and accredited public  
20 or private nonprofit educational or health care institutions for bona  
21 fide research purposes. However, no information so disclosed shall  
22 be further disclosed by the recipient in any way that would disclose  
23 the identity of a patient or violate this part.

24 (8) A provider of health care or health care service plan that has  
25 created medical information as a result of employment-related  
26 health care services to an employee conducted at the specific prior  
27 written request and expense of the employer may disclose to the  
28 employee's employer that part of the information that:

29 (A) Is relevant in a lawsuit, arbitration, grievance, or other claim  
30 or challenge to which the employer and the employee are parties  
31 and in which the patient has placed in issue his or her medical  
32 history, mental or physical condition, or treatment, provided that  
33 information may only be used or disclosed in connection with that  
34 proceeding.

35 (B) Describes functional limitations of the patient that may  
36 entitle the patient to leave from work for medical reasons or limit  
37 the patient's fitness to perform his or her present employment,  
38 provided that no statement of medical cause is included in the  
39 information disclosed.

1 (9) Unless the provider of health care or health care service plan  
2 is notified in writing of an agreement by the sponsor, insurer, or  
3 administrator to the contrary, the information may be disclosed to  
4 a sponsor, insurer, or administrator of a group or individual insured  
5 or uninsured plan or policy that the patient seeks coverage by or  
6 benefits from, if the information was created by the provider of  
7 health care or health care service plan as the result of services  
8 conducted at the specific prior written request and expense of the  
9 sponsor, insurer, or administrator for the purpose of evaluating the  
10 application for coverage or benefits.

11 (10) The information may be disclosed to a health care service  
12 plan by providers of health care that contract with the health care  
13 service plan and may be transferred among providers of health  
14 care that contract with the health care service plan, for the purpose  
15 of administering the health care service plan. Medical information  
16 may not otherwise be disclosed by a health care service plan except  
17 in accordance with the provisions of this part.

18 (11) Nothing in this part shall prevent the disclosure by a  
19 provider of health care or a health care service plan to an insurance  
20 institution, agent, or support organization, subject to Article 6.6  
21 (commencing with Section 791) of Part 2 of Division 1 of the  
22 Insurance Code, of medical information if the insurance institution,  
23 agent, or support organization has complied with all requirements  
24 for obtaining the information pursuant to Article 6.6 (commencing  
25 with Section 791) of Part 2 of Division 1 of the Insurance Code.

26 (12) The information relevant to the patient's condition and care  
27 and treatment provided may be disclosed to a probate court  
28 investigator in the course of any investigation required or  
29 authorized in a conservatorship proceeding under the  
30 Guardianship-Conservatorship Law as defined in Section 1400 of  
31 the Probate Code, or to a probate court investigator, probation  
32 officer, or domestic relations investigator engaged in determining  
33 the need for an initial guardianship or continuation of an existent  
34 guardianship.

35 (13) The information may be disclosed to an organ procurement  
36 organization or a tissue bank processing the tissue of a decedent  
37 for transplantation into the body of another person, but only with  
38 respect to the donating decedent, for the purpose of aiding the  
39 transplant. For the purpose of this paragraph, the terms "tissue

1 bank” and “tissue” have the same meaning as defined in Section  
2 1635 of the Health and Safety Code.

3 (14) The information may be disclosed when the disclosure is  
4 otherwise specifically authorized by law, including, but not limited  
5 to, the voluntary reporting, either directly or indirectly, to the  
6 federal Food and Drug Administration of adverse events related  
7 to drug products or medical device problems.

8 (15) Basic information, including the patient’s name, city of  
9 residence, age, sex, and general condition, may be disclosed to a  
10 state or federally recognized disaster relief organization for the  
11 purpose of responding to disaster welfare inquiries.

12 (16) The information may be disclosed to a third party for  
13 purposes of encoding, encrypting, or otherwise anonymizing data.  
14 However, no information so disclosed shall be further disclosed  
15 by the recipient in any way that would violate this part, including  
16 the unauthorized manipulation of coded or encrypted medical  
17 information that reveals individually identifiable medical  
18 information.

19 (17) For purposes of disease management programs and services  
20 as defined in Section 1399.901 of the Health and Safety Code,  
21 information may be disclosed as follows: (A) to an entity  
22 contracting with a health care service plan or the health care service  
23 plan’s contractors to monitor or administer care of enrollees for a  
24 covered benefit, if the disease management services and care are  
25 authorized by a treating physician, or (B) to a disease management  
26 organization, as defined in Section 1399.900 of the Health and  
27 Safety Code, that complies fully with the physician authorization  
28 requirements of Section 1399.902 of the Health and Safety Code,  
29 if the health care service plan or its contractor provides or has  
30 provided a description of the disease management services to a  
31 treating physician or to the health care service plan’s or contractor’s  
32 network of physicians. Nothing in this paragraph shall be construed  
33 to require physician authorization for the care or treatment of the  
34 adherents of a well-recognized church or religious denomination  
35 who depend solely upon prayer or spiritual means for healing in  
36 the practice of the religion of that church or denomination.

37 (18) The information may be disclosed, as permitted by state  
38 and federal law or regulation, to a local health department for the  
39 purpose of preventing or controlling disease, injury, or disability,  
40 including, but not limited to, the reporting of disease, injury, vital

1 events, including, but not limited to, birth or death, and the conduct  
2 of public health surveillance, public health investigations, and  
3 public health interventions, as authorized or required by state or  
4 federal law or regulation.

5 (19) The information may be disclosed as described in Section  
6 56.103.

7 (d) Except to the extent expressly authorized by the patient or  
8 enrollee or subscriber or as provided by subdivisions (b) and (c),  
9 no provider of health care, health care service plan, contractor, or  
10 corporation and its subsidiaries and affiliates shall intentionally  
11 share, sell, use for marketing, or otherwise use any medical  
12 information for any purpose not necessary to provide health care  
13 services to the patient.

14 (e) Except to the extent expressly authorized by the patient or  
15 enrollee or subscriber or as provided by subdivisions (b) and (c),  
16 no contractor or corporation and its subsidiaries and affiliates shall  
17 further disclose medical information regarding a patient of the  
18 provider of health care or an enrollee or subscriber of a health care  
19 service plan or insurer or self-insured employer received under  
20 this section to any person or entity that is not engaged in providing  
21 direct health care services to the patient or his or her provider of  
22 health care or health care service plan or insurer or self-insured  
23 employer.

24 SEC. 2.9. Section 56.10 of the Civil Code is amended to read:

25 56.10. (a) No provider of health care, health care service plan,  
26 or contractor shall disclose medical information regarding a patient  
27 of the provider of health care or an enrollee or subscriber of a  
28 health care service plan without first obtaining an authorization,  
29 except as provided in subdivision (b) or (c).

30 (b) A provider of health care, a health care service plan, or a  
31 contractor shall disclose medical information if the disclosure is  
32 compelled by any of the following:

33 (1) By a court pursuant to an order of that court.

34 (2) By a board, commission, or administrative agency for  
35 purposes of adjudication pursuant to its lawful authority.

36 (3) By a party to a proceeding before a court or administrative  
37 agency pursuant to a subpoena, subpoena duces tecum, notice to  
38 appear served pursuant to Section 1987 of the Code of Civil  
39 Procedure, or any provision authorizing discovery in a proceeding  
40 before a court or administrative agency.

1 (4) By a board, commission, or administrative agency pursuant  
2 to an investigative subpoena issued under Article 2 (commencing  
3 with Section 11180) of Chapter 2 of Part 1 of Division 3 of Title  
4 2 of the Government Code.

5 (5) By an arbitrator or arbitration panel, when arbitration is  
6 lawfully requested by either party, pursuant to a subpoena duces  
7 tecum issued under Section 1282.6 of the Code of Civil Procedure,  
8 or any other provision authorizing discovery in a proceeding before  
9 an arbitrator or arbitration panel.

10 (6) By a search warrant lawfully issued to a governmental law  
11 enforcement agency.

12 (7) By the patient or the patient's representative pursuant to  
13 Chapter 1 (commencing with Section 123100) of Part 1 of Division  
14 106 of the Health and Safety Code.

15 (8) By a coroner, when requested in the course of an  
16 investigation by the coroner's office for the purpose of identifying  
17 the decedent or locating next of kin, or when investigating deaths  
18 that may involve public health concerns, organ or tissue donation,  
19 child abuse, elder abuse, suicides, poisonings, accidents, sudden  
20 infant deaths, suspicious deaths, unknown deaths, or criminal  
21 deaths, or when otherwise authorized by the decedent's  
22 representative. Medical information requested by the coroner under  
23 this paragraph shall be limited to information regarding the patient  
24 who is the decedent and who is the subject of the investigation and  
25 shall be disclosed to the coroner without delay upon request.

26 (9) When otherwise specifically required by law.

27 (c) A provider of health care or a health care service plan may  
28 disclose medical information as follows:

29 (1) The information may be disclosed to providers of health  
30 care, health care service plans, contractors, or other health care  
31 professionals or facilities for purposes of diagnosis or treatment  
32 of the patient. This includes, in an emergency situation, the  
33 communication of patient information by radio transmission or  
34 other means between emergency medical personnel at the scene  
35 of an emergency, or in an emergency medical transport vehicle,  
36 and emergency medical personnel at a health facility licensed  
37 pursuant to Chapter 2 (commencing with Section 1250) of Division  
38 2 of the Health and Safety Code.

39 (2) The information may be disclosed to an insurer, employer,  
40 health care service plan, hospital service plan, employee benefit

1 plan, governmental authority, contractor, or any other person or  
2 entity responsible for paying for health care services rendered to  
3 the patient, to the extent necessary to allow responsibility for  
4 payment to be determined and payment to be made. If (A) the  
5 patient is, by reason of a comatose or other disabling medical  
6 condition, unable to consent to the disclosure of medical  
7 information and (B) no other arrangements have been made to pay  
8 for the health care services being rendered to the patient, the  
9 information may be disclosed to a governmental authority to the  
10 extent necessary to determine the patient's eligibility for, and to  
11 obtain, payment under a governmental program for health care  
12 services provided to the patient. The information may also be  
13 disclosed to another provider of health care or health care service  
14 plan as necessary to assist the other provider or health care service  
15 plan in obtaining payment for health care services rendered by that  
16 provider of health care or health care service plan to the patient.

17 (3) The information may be disclosed to a person or entity that  
18 provides billing, claims management, medical data processing, or  
19 other administrative services for providers of health care or health  
20 care service plans or for any of the persons or entities specified in  
21 paragraph (2). However, no information so disclosed shall be  
22 further disclosed by the recipient in any way that would violate  
23 this part.

24 (4) The information may be disclosed to organized committees  
25 and agents of professional societies or of medical staffs of licensed  
26 hospitals, licensed health care service plans, professional standards  
27 review organizations, independent medical review organizations  
28 and their selected reviewers, utilization and quality control peer  
29 review organizations as established by Congress in Public Law  
30 97-248 in 1982, contractors, or persons or organizations insuring,  
31 responsible for, or defending professional liability that a provider  
32 may incur, if the committees, agents, health care service plans,  
33 organizations, reviewers, contractors, or persons are engaged in  
34 reviewing the competence or qualifications of health care  
35 professionals or in reviewing health care services with respect to  
36 medical necessity, level of care, quality of care, or justification of  
37 charges.

38 (5) The information in the possession of a provider of health  
39 care or health care service plan may be reviewed by a private or  
40 public body responsible for licensing or accrediting the provider

1 of health care or health care service plan. However, no  
2 patient-identifying medical information may be removed from the  
3 premises except as expressly permitted or required elsewhere by  
4 law, nor shall that information be further disclosed by the recipient  
5 in any way that would violate this part.

6 (6) The information may be disclosed to the county coroner in  
7 the course of an investigation by the coroner's office when  
8 requested for all purposes not included in paragraph (8) of  
9 subdivision (b).

10 (7) The information may be disclosed to public agencies, clinical  
11 investigators, including investigators conducting epidemiologic  
12 studies, health care research organizations, and accredited public  
13 or private nonprofit educational or health care institutions for bona  
14 fide research purposes. However, no information so disclosed shall  
15 be further disclosed by the recipient in any way that would disclose  
16 the identity of a patient or violate this part.

17 (8) A provider of health care or health care service plan that has  
18 created medical information as a result of employment-related  
19 health care services to an employee conducted at the specific prior  
20 written request and expense of the employer may disclose to the  
21 employee's employer that part of the information that:

22 (A) Is relevant in a lawsuit, arbitration, grievance, or other claim  
23 or challenge to which the employer and the employee are parties  
24 and in which the patient has placed in issue his or her medical  
25 history, mental or physical condition, or treatment, provided that  
26 information may only be used or disclosed in connection with that  
27 proceeding.

28 (B) Describes functional limitations of the patient that may  
29 entitle the patient to leave from work for medical reasons or limit  
30 the patient's fitness to perform his or her present employment,  
31 provided that no statement of medical cause is included in the  
32 information disclosed.

33 (9) Unless the provider of health care or health care service plan  
34 is notified in writing of an agreement by the sponsor, insurer, or  
35 administrator to the contrary, the information may be disclosed to  
36 a sponsor, insurer, or administrator of a group or individual insured  
37 or uninsured plan or policy that the patient seeks coverage by or  
38 benefits from, if the information was created by the provider of  
39 health care or health care service plan as the result of services  
40 conducted at the specific prior written request and expense of the



1 sponsor, insurer, or administrator for the purpose of evaluating the  
2 application for coverage or benefits.

3 (10) The information may be disclosed to a health care service  
4 plan by providers of health care that contract with the health care  
5 service plan and may be transferred among providers of health  
6 care that contract with the health care service plan, for the purpose  
7 of administering the health care service plan. Medical information  
8 may not otherwise be disclosed by a health care service plan except  
9 in accordance with the provisions of this part.

10 (11) Nothing in this part shall prevent the disclosure by a  
11 provider of health care or a health care service plan to an insurance  
12 institution, agent, or support organization, subject to Article 6.6  
13 (commencing with Section 791) of Part 2 of Division 1 of the  
14 Insurance Code, of medical information if the insurance institution,  
15 agent, or support organization has complied with all requirements  
16 for obtaining the information pursuant to Article 6.6 (commencing  
17 with Section 791) of Part 2 of Division 1 of the Insurance Code.

18 (12) The information relevant to the patient's condition and care  
19 and treatment provided may be disclosed to a probate court  
20 investigator in the course of any investigation required or  
21 authorized in a conservatorship proceeding under the  
22 Guardianship-Conservatorship Law as defined in Section 1400 of  
23 the Probate Code, or to a probate court investigator, probation  
24 officer, or domestic relations investigator engaged in determining  
25 the need for an initial guardianship or continuation of an existent  
26 guardianship.

27 (13) The information may be disclosed to an organ procurement  
28 organization or a tissue bank processing the tissue of a decedent  
29 for transplantation into the body of another person, but only with  
30 respect to the donating decedent, for the purpose of aiding the  
31 transplant. For the purpose of this paragraph, the terms "tissue  
32 bank" and "tissue" have the same meaning as defined in Section  
33 1635 of the Health and Safety Code.

34 (14) The information may be disclosed when the disclosure is  
35 otherwise specifically authorized by law, including, but not limited  
36 to, the voluntary reporting, either directly or indirectly, to the  
37 federal Food and Drug Administration of adverse events related  
38 to drug products or medical device problems.

39 (15) Basic information, including the patient's name, city of  
40 residence, age, sex, and general condition, may be disclosed to a

1 state or federally recognized disaster relief organization for the  
2 purpose of responding to disaster welfare inquiries.

3 (16) The information may be disclosed to a third party for  
4 purposes of encoding, encrypting, or otherwise anonymizing data.  
5 However, no information so disclosed shall be further disclosed  
6 by the recipient in any way that would violate this part, including  
7 the unauthorized manipulation of coded or encrypted medical  
8 information that reveals individually identifiable medical  
9 information.

10 (17) For purposes of disease management programs and services  
11 as defined in Section 1399.901 of the Health and Safety Code,  
12 information may be disclosed as follows: (A) to an entity  
13 contracting with a health care service plan or the health care service  
14 plan's contractors to monitor or administer care of enrollees for a  
15 covered benefit, if the disease management services and care are  
16 authorized by a treating physician, or (B) to a disease management  
17 organization, as defined in Section 1399.900 of the Health and  
18 Safety Code, that complies fully with the physician authorization  
19 requirements of Section 1399.902 of the Health and Safety Code,  
20 if the health care service plan or its contractor provides or has  
21 provided a description of the disease management services to a  
22 treating physician or to the health care service plan's or contractor's  
23 network of physicians. Nothing in this paragraph shall be construed  
24 to require physician authorization for the care or treatment of the  
25 adherents of a well-recognized church or religious denomination  
26 who depend solely upon prayer or spiritual means for healing in  
27 the practice of the religion of that church or denomination.

28 (18) The information may be disclosed, as permitted by state  
29 and federal law or regulation, to a local health department for the  
30 purpose of preventing or controlling disease, injury, or disability,  
31 including, but not limited to, the reporting of disease, injury, vital  
32 events, including, but not limited to, birth or death, and the conduct  
33 of public health surveillance, public health investigations, and  
34 public health interventions, as authorized or required by state or  
35 federal law or regulation.

36 (19) The information may be disclosed, consistent with  
37 applicable law and standards of ethical conduct, by a  
38 psychotherapist, as defined in Section 1010 of the Evidence Code,  
39 if the psychotherapist, in good faith, believes the disclosure is  
40 necessary to prevent or lessen a serious and imminent threat to the

1 health or safety of a reasonably foreseeable victim or victims, and  
2 the disclosure is made to a person or persons reasonably able to  
3 prevent or lessen the threat, including the target of the threat.

4 (20) The information may be disclosed as described in Section  
5 56.103.

6 (d) Except to the extent expressly authorized by the patient or  
7 enrollee or subscriber or as provided by subdivisions (b) and (c),  
8 no provider of health care, health care service plan, contractor, or  
9 corporation and its subsidiaries and affiliates shall intentionally  
10 share, sell, use for marketing, or otherwise use any medical  
11 information for any purpose not necessary to provide health care  
12 services to the patient.

13 (e) Except to the extent expressly authorized by the patient or  
14 enrollee or subscriber or as provided by subdivisions (b) and (c),  
15 no contractor or corporation and its subsidiaries and affiliates shall  
16 further disclose medical information regarding a patient of the  
17 provider of health care or an enrollee or subscriber of a health care  
18 service plan or insurer or self-insured employer received under  
19 this section to any person or entity that is not engaged in providing  
20 direct health care services to the patient or his or her provider of  
21 health care or health care service plan or insurer or self-insured  
22 employer.

23 SEC. 3. Section 56.103 is added to the Civil Code, to read:

24 56.103. (a) A provider of health care may disclose medical  
25 information to a county social worker, a probation officer, or any  
26 other person who is legally authorized to have custody or care of  
27 a minor for the purpose of coordinating health care services and  
28 medical treatment provided to the minor.

29 (b) For purposes of this section, health care services and medical  
30 treatment includes one or more providers of health care providing,  
31 coordinating, or managing health care and related services,  
32 including, but not limited to, a provider of health care coordinating  
33 health care with a third party, consultation between providers of  
34 health care and medical treatment relating to a minor, or a provider  
35 of health care referring a minor for health care services to another  
36 provider of health care.

37 (c) For purposes of this section, a county social worker, a  
38 probation officer, or any other person who is legally authorized to  
39 have custody or care of a minor shall be considered a third party  
40 who may receive any of the following:

1 (1) Medical information described in Sections 56.05 and 56.10.  
2 (2) Protected health information described in Section 160.103  
3 of Title 45 of the Code of Federal Regulations.

4 (d) Medical information disclosed to a county social worker,  
5 probation officer, or any other person who is legally authorized to  
6 have custody or care of a minor shall not be further disclosed by  
7 the recipient unless the disclosure is for the purpose of coordinating  
8 health care services and medical treatment of the minor and the  
9 disclosure is authorized by law. *Medical information disclosed*  
10 *pursuant to this section may not be admitted into evidence in any*  
11 *criminal or delinquency proceeding against the minor. Nothing*  
12 *in this subdivision shall prohibit identical evidence from being*  
13 *admissible in a criminal proceeding if that evidence is derived*  
14 *solely from lawful means other than this section and is permitted*  
15 *by law.*

16 (e) (1) Notwithstanding Section 56.104, if a provider of health  
17 care determines that the disclosure of medical information  
18 concerning the diagnosis and treatment of a mental health condition  
19 of a minor is reasonably necessary for the purpose of assisting in  
20 coordinating the treatment and care of the minor, that information  
21 may be disclosed to a county social worker, probation officer, or  
22 any other person who is legally authorized to have custody or care  
23 of the minor. The information shall not be further disclosed by the  
24 recipient unless the disclosure is for the purpose of coordinating  
25 mental health services and treatment of the minor and the disclosure  
26 is authorized by law.

27 (2) As used in this subdivision, “medical information” does not  
28 include psychotherapy notes as defined in Section 164.501 of Title  
29 45 of the Code of Federal Regulations.

30 (f) The disclosure of information pursuant to this section is not  
31 intended to limit the disclosure of information when that disclosure  
32 is otherwise required by law.

33 (g) For purposes of this section, “minor” means a minor taken  
34 into temporary custody or as to who a petition has been filed with  
35 the court, or who has been adjudged to be a dependent child or  
36 ward of the juvenile court pursuant to Section 300 or 600 of the  
37 Welfare and Institutions Code.

38 (h) (1) Except as described in paragraph (1) of subdivision (e),  
39 nothing in this section shall be construed to limit or otherwise

1 affect existing privacy protections provided for in state or federal  
2 law.

3 (2) Nothing in this section shall be construed to expand the  
4 authority of a social worker, probation officer, or custodial  
5 caregiver beyond the authority provided under existing law to a  
6 parent or a patient representative regarding access to medical  
7 information.

8 SEC. 4. (a) Section 2.5 of this bill incorporates amendments  
9 to Section 56.10 of the Civil Code proposed by both this bill and  
10 AB 1178. It shall only become operative if (1) both bills are  
11 enacted and become effective on or before January 1, 2008, (2)  
12 each bill amends Section 56.10 of the Civil Code, (3) AB 1727 is  
13 not enacted or as enacted does not amend that section, and (4) this  
14 bill is enacted after AB 1178, in which case Sections 2, 2.7, and  
15 2.9 of this bill shall not become operative.

16 (b) Section 2.7 of this bill incorporates amendments to Section  
17 56.10 of the Civil Code proposed by both this bill and AB 1727.  
18 It shall only become operative if (1) both bills are enacted and  
19 become effective on or before January 1, 2008, (2) each bill amends  
20 Section 56.10 of the Civil Code, (3) AB 1178 is not enacted or as  
21 enacted does not amend that section, and (4) this bill is enacted  
22 after AB 1727 in which case Sections 2, 2.5, and 2.9 of this bill  
23 shall not become operative.

24 (c) Section 2.9 of this bill incorporates amendments to Section  
25 56.10 of the Civil Code proposed by this bill, AB 1178, and AB  
26 1727. It shall only become operative if (1) all three bills are enacted  
27 and become effective on or before January 1, 2008, (2) all three  
28 bills amend Section 56.10 of the Civil Code, and (3) this bill is  
29 enacted after AB 1178 and AB 1727, in which case Sections 2,  
30 2.5, and 2.7 of this bill shall not become operative.

31 SEC. 5. No reimbursement is required by this act pursuant to  
32 Section 6 of Article XIII B of the California Constitution because  
33 the only costs that may be incurred by a local agency or school  
34 district will be incurred because this act creates a new crime or  
35 infraction, eliminates a crime or infraction, or changes the penalty  
36 for a crime or infraction, within the meaning of Section 17556 of  
37 the Government Code, or changes the definition of a crime within

- 1 the meaning of Section 6 of Article XIII B of the California
- 2 Constitution.

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